

Senate Engrossed House Bill

FILED

**KEN BENNETT
SECRETARY OF STATE**

State of Arizona
House of Representatives
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Second Regular Session
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CHAPTER 172

HOUSE BILL 2021

AN ACT

AMENDING SECTIONS 32-2501, 32-2504 AND 32-2521, ARIZONA REVISED STATUTES; REPEALING SECTION 32-2524, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 25, ARTICLE 2, ARIZONA REVISED STATUTES, BY ADDING A NEW SECTION 32-2524; AMENDING SECTIONS 32-2526, 32-2528, 32-2531 AND 32-2533, ARIZONA REVISED STATUTES; REPEALING SECTION 32-2534, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 25, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING A NEW SECTION 32-2534; AMENDING SECTION 32-2551, ARIZONA REVISED STATUTES; RELATING TO PHYSICIAN ASSISTANTS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 32-2501, Arizona Revised Statutes, is amended to
3 read:

4 32-2501. Definitions

5 In this chapter, unless the context otherwise requires:

6 1. "Active license" means a regular ~~or temporary~~ license issued
7 pursuant to this chapter.

8 2. "Adequate records" means legible medical records containing, at a
9 minimum, sufficient information to identify the patient, support the
10 diagnosis, justify the treatment, accurately document the results, indicate
11 advice and cautionary warnings provided to the patient and provide sufficient
12 information for another practitioner to assume continuity of the patient's
13 care at any point in the course of treatment.

14 3. "Advisory letter" means a nondisciplinary letter to notify a
15 physician assistant that either:

16 (a) While there is insufficient evidence to support disciplinary
17 action, the board believes that continuation of the activities that led to
18 the investigation may result in further board action against the licensee.

19 (b) The violation is a minor or technical violation that is not of
20 sufficient merit to warrant disciplinary action.

21 (c) While the licensee has demonstrated substantial compliance through
22 rehabilitation or remediation that has mitigated the need for disciplinary
23 action, the board believes that repetition of the activities that led to the
24 investigation may result in further board action against the licensee.

25 4. "Approved program" means a physician assistant educational program
26 ~~that has been fully or provisionally accredited by the committee on allied~~
27 ~~health education and accreditation or by the commission on the accreditation~~
28 ~~for allied health education programs, or successor agencies, on the~~
29 ~~recommendation of the accreditation review committee~~ COMMISSION on education
30 for physician assistants, OR ONE OF ITS PREDECESSOR AGENCIES, THE COMMITTEE
31 ON ALLIED HEALTH EDUCATION AND ACCREDITATION OR THE COMMISSION ON THE
32 ACCREDITATION OF ALLIED HEALTH EDUCATIONAL PROGRAMS.

33 5. "Board" means the Arizona regulatory board of physician assistants.

34 6. "Completed application" means an application for which the
35 applicant has supplied all required fees, information and correspondence
36 requested by the board on forms and in a manner acceptable to the board.

37 7. "Immediate family" means the spouse, natural or adopted children,
38 father, mother, brothers and sisters of the physician assistant and the
39 natural or adopted children, father, mother, brothers and sisters of the
40 physician assistant's spouse.

41 8. "Letter of reprimand" means a disciplinary letter that is issued by
42 the board and that informs the physician assistant that the physician
43 assistant's conduct violates state or federal law and may require the board
44 to monitor the physician assistant.

1 9. "Limit" means a nondisciplinary action that is taken by the board
2 and that alters a physician assistant's practice or medical activities if
3 there is evidence that the physician assistant is or may be mentally or
4 physically unable to safely engage in health care tasks.

5 10. "Medically incompetent" means that a physician assistant lacks
6 sufficient medical knowledge or skills, or both, in performing delegated
7 health care tasks to a degree likely to endanger the health or safety of
8 patients.

9 11. "Minor surgery" means those invasive procedures that may be
10 delegated to a physician assistant by a supervising physician, that are
11 consistent with the training and experience of the physician assistant, that
12 are normally taught in courses of training approved by the board and that
13 have been approved by the board as falling within a scope of practice of a
14 physician assistant. Minor surgery does not include a surgical abortion.

15 ~~12. "Notification of supervision" means a written notice that is~~
16 ~~provided to the board by a supervising physician and that notifies the board~~
17 ~~that the physician intends to supervise a physician assistant. The physician~~
18 ~~shall provide this notice on a form prescribed by the board before the~~
19 ~~physician assistant begins work.~~

20 ~~13.~~ 12. "Physician" means a physician WHO IS licensed pursuant to
21 chapter 13 or 17 of this title.

22 ~~14.~~ 13. "Physician assistant" means a person who is licensed pursuant
23 to this chapter and who performs health care tasks pursuant to a dependent
24 relationship PRACTICES MEDICINE with a physician SUPERVISION.

25 ~~15. "Primary place for meeting patients" includes the supervising~~
26 ~~physician's office, health care institutions in which the supervising~~
27 ~~physician's patients are located or homes of patients.~~

28 ~~16.~~ 14. "Regular license" means a valid and existing license issued
29 pursuant to section 32-2521 to perform health care tasks. Regular license
30 does not include a temporary license.

31 ~~17.~~ 15. "Restrict" means a disciplinary action that is taken by the
32 board and that alters a physician assistant's practice or medical activities
33 if there is evidence that the physician assistant is or may be medically
34 incompetent or guilty of unprofessional conduct.

35 ~~18.~~ 16. "Supervising physician" means a physician who holds a current
36 unrestricted license, provides a notification of supervision, WHO SUPERVISES
37 A PHYSICIAN ASSISTANT AND WHO assumes legal responsibility for health care
38 tasks performed by the physician assistant and is approved by the board.

39 ~~19. "Supervising physician's agent" means a physician who holds a~~
40 ~~current unrestricted license, is a cosignatory on the notification of~~
41 ~~supervision, agrees to act as the supervising physician in the supervising~~
42 ~~physician's absence and is approved by the board.~~

43 20. 17. "Supervision" means a physician's opportunity or ability to
44 provide or exercise DIRECTION AND control over the services of a physician
45 assistant. Supervision does not require a physician's constant physical

1 presence if the supervising physician ~~or the supervising physician's agent~~ is
2 or can be easily in contact with the physician assistant by radio, telephone
3 ~~or~~ telecommunication.

4 ~~21-~~ 18. "Unprofessional conduct" includes the following acts by a
5 physician assistant that occur in this state or elsewhere:

6 (a) Violation of any federal or state law or rule that applies to the
7 performance of health care tasks as a physician assistant. Conviction in any
8 court of competent jurisdiction is conclusive evidence of a violation.

9 (b) Claiming to be a physician or knowingly permitting another person
10 to represent that person as a physician.

11 (c) Performing health care tasks that have not been delegated by the
12 supervising physician.

13 (d) Habitual intemperance in the use of alcohol or habitual substance
14 abuse.

15 (e) Signing a blank, undated or predated prescription form.

16 (f) Gross malpractice, repeated malpractice or any malpractice
17 resulting in the death of a patient.

18 (g) Representing that a manifestly incurable disease or infirmity can
19 be permanently cured or that a disease, ailment or infirmity can be cured by
20 a secret method, procedure, treatment, medicine or device, if this is not
21 true.

22 (h) Refusing to divulge to the board on demand the means, method,
23 procedure, modality of treatment or medicine used in the treatment of a
24 disease, injury, ailment or infirmity.

25 (i) Prescribing or dispensing controlled substances or
26 prescription-only drugs for which the physician assistant is not approved or
27 in excess of the amount authorized pursuant to this chapter.

28 (j) Any conduct or practice that is or might be harmful or dangerous
29 to the health of a patient or the public.

30 (k) Violation of a formal order, probation or stipulation issued by
31 the board.

32 (l) Failing to clearly disclose the person's identity as a physician
33 assistant in the course of the physician assistant's employment.

34 (m) Failing to use and affix the initials "P.A." or "P.A.-C." after
35 the physician assistant's name or signature on charts, prescriptions or
36 professional correspondence.

37 (n) Procuring or attempting to procure a physician assistant license
38 by fraud, misrepresentation or knowingly taking advantage of the mistake of
39 another.

40 (o) Having professional connection with or lending the physician
41 assistant's name to an illegal practitioner of any of the healing arts.

42 (p) Failing or refusing to maintain adequate records on a patient.

43 (q) Using controlled substances that have not been prescribed by a
44 physician, physician assistant, dentist or nurse practitioner for use during
45 a prescribed course of treatment.

1 (r) Prescribing or dispensing controlled substances to members of the
2 physician assistant's immediate family.

3 (s) Prescribing, dispensing or administering any controlled substance
4 or prescription-only drug for other than accepted therapeutic purposes.

5 (t) Knowingly making any written or oral false or fraudulent statement
6 in connection with the performance of health care tasks or when applying for
7 privileges or renewing an application for privileges at a health care
8 institution.

9 (u) Committing a felony, whether or not involving moral turpitude, or
10 a misdemeanor involving moral turpitude. In either case, conviction by a
11 court of competent jurisdiction or a plea of no contest is conclusive
12 evidence of the commission.

13 (v) Having a certification or license refused, revoked, suspended,
14 limited or restricted by any other licensing jurisdiction for the inability
15 to safely and skillfully perform health care tasks or for unprofessional
16 conduct as defined by that jurisdiction that directly or indirectly
17 corresponds to any act of unprofessional conduct as prescribed by this
18 paragraph.

19 (w) Having sanctions including restriction, suspension or removal from
20 practice imposed by an agency of the federal government.

21 (x) Violating or attempting to violate, directly or indirectly, or
22 assisting in or abetting the violation of or conspiring to violate a
23 provision of this chapter.

24 (y) Using the term "doctor" or the abbreviation "Dr." on a name tag or
25 in a way that leads the public to believe that the physician assistant is
26 licensed to practice as an allopathic or an osteopathic physician in this
27 state.

28 (z) Failing to furnish legally requested information to the board or
29 its investigator in a timely manner.

30 (aa) Failing to allow properly authorized board personnel to examine
31 on demand documents, reports and records of any kind relating to the
32 physician assistant's performance of health care tasks.

33 (bb) Knowingly making a false or misleading statement on a form
34 required by the board or in written correspondence or attachments furnished
35 to the board.

36 (cc) Failing to submit to a body fluid examination and other
37 examinations known to detect the presence of alcohol or other drugs pursuant
38 to an agreement with the board or an order of the board.

39 (dd) Violating a formal order, probation agreement or stipulation
40 issued or entered into by the board or its executive director.

41 (ee) Except as otherwise required by law, intentionally betraying a
42 professional secret or intentionally violating a privileged communication.

43 (ff) Allowing the use of the licensee's name in any way to enhance or
44 permit the continuance of the activities of, or maintaining a professional

1 connection with, an illegal practitioner of medicine or the performance of
2 health care tasks by a person who is not licensed pursuant to this chapter.

3 (gg) False, fraudulent, deceptive or misleading advertising by a
4 physician assistant or the physician assistant's staff or representative.

5 (hh) Knowingly failing to disclose to a patient on a form that is
6 prescribed by the board and that is dated and signed by the patient or
7 guardian acknowledging that the patient or guardian has read and understands
8 that the licensee has a direct financial interest in a separate diagnostic or
9 treatment agency or in nonroutine goods or services that the patient is being
10 prescribed and if the prescribed treatment, goods or services are available
11 on a competitive basis. This subdivision does not apply to a referral by one
12 physician assistant to another physician assistant or to a doctor of medicine
13 or a doctor of osteopathy within a group working together.

14 (ii) WITH THE EXCEPTION OF HEAVY METAL POISONING, using chelation
15 therapy in the treatment of arteriosclerosis ~~or as any other form of therapy~~
16 OR AS ANY OTHER FORM OF THERAPY WITHOUT ADEQUATE INFORMED PATIENT CONSENT OR
17 WITHOUT CONFORMING TO GENERALLY ACCEPTED EXPERIMENTAL CRITERIA INCLUDING
18 PROTOCOLS, DETAILED RECORDS, PERIODIC ANALYSIS OF RESULTS AND PERIODIC REVIEW
19 BY A MEDICAL PEER REVIEW COMMITTEE, OR WITHOUT APPROVAL BY THE UNITED STATES
20 FOOD AND DRUG ADMINISTRATION OR ITS SUCCESSOR AGENCY..

21 (jj) Prescribing, dispensing or administering anabolic or androgenic
22 steroids for other than therapeutic purposes.

23 (kk) Prescribing, dispensing or furnishing a prescription medication
24 or a prescription-only device as defined in section 32-1901 to a person
25 unless the licensee first conducts a physical examination of that person or
26 has previously established a professional relationship with the person. This
27 subdivision does not apply to:

28 (i) A physician assistant who provides temporary patient care on
29 behalf of the patient's regular treating licensed health care professional.

30 (ii) Emergency medical situations as defined in section 41-1831.

31 (iii) Prescriptions written to prepare a patient for a medical
32 examination.

33 (iv) Prescriptions written or antimicrobials dispensed to a contact as
34 defined in section 36-661 who is believed to have had significant exposure
35 risk as defined in section 36-661 with another person who has been diagnosed
36 with a communicable disease as defined in section 36-661 by the prescribing
37 or dispensing physician assistant.

38 (ll) Engaging in sexual conduct with a current patient or with a
39 former patient within six months after the last medical consultation unless
40 the patient was the licensee's spouse at the time of the contact or,
41 immediately preceding the professional relationship, was in a dating or
42 engagement relationship with the licensee. For the purposes of this
43 subdivision, "sexual conduct" includes:

44 (i) Engaging in or soliciting sexual relationships, whether consensual
45 or nonconsensual.

1 (ii) Making sexual advances, requesting sexual favors or engaging in
2 other verbal conduct or physical contact of a sexual nature with a patient.

3 (iii) Intentionally viewing a completely or partially disrobed patient
4 in the course of treatment if the viewing is not related to patient diagnosis
5 or treatment under current practice standards.

6 (mm) Performing health care tasks under a false or assumed name in
7 this state.

8 Sec. 2. Section 32-2504, Arizona Revised Statutes, is amended to read:
9 32-2504. Powers and duties; subcommittees

10 A. The board shall:

11 1. As its primary duty, protect the public from unlawful, incompetent,
12 unqualified, impaired or unprofessional physician assistants.

13 2. License and regulate physician assistants pursuant to this chapter.

14 3. Order and evaluate physical, psychological, psychiatric and
15 competency testing of licensees and applicants the board determines is
16 necessary to enforce this chapter.

17 4. Review the credentials and the abilities of applicants for
18 licensure whose professional records or physical or mental capabilities may
19 not meet the requirements of this chapter.

20 5. Initiate investigations and determine on its own motion if a
21 licensee has engaged in unprofessional conduct or is or may be incompetent or
22 mentally or physically unable to safely perform health care tasks.

23 6. Establish fees and penalties pursuant to section 32-2526.

24 7. Develop and recommend standards governing the profession.

25 8. Engage in the full exchange of information with the licensing and
26 disciplinary boards and professional associations of other states and
27 jurisdictions of the United States and foreign countries and a statewide
28 association for physician assistants.

29 9. Direct the preparation and circulation of educational material the
30 board determines is helpful and proper for its licensees.

31 ~~10. Approve notification of supervision including the selection of~~
32 ~~supervising physicians and supervising agents.~~

33 ~~11.~~ 10. Discipline and rehabilitate physician assistants pursuant to
34 this chapter.

35 ~~12.~~ 11. Certify physician assistants for fourteen day prescription
36 privileges for schedule II or schedule III controlled substances if the
37 physician assistant:

38 (a) Within the preceding three years of application, completed
39 forty-five hours in pharmacology or clinical management of drug therapy or ~~if~~
40 at the time of application is certified by a national commission on the
41 certification of physician assistants or its successor.

42 (b) Met any other requirement established by board rule.

43 B. The board may make and adopt rules necessary or proper for the
44 administration of this chapter.

1 C. The chairperson may establish subcommittees consisting of board
2 members and define their duties as the chairperson deems necessary to carry
3 out the functions of the board.

4 D. Board employees, including the executive director, temporary
5 personnel and professional medical investigators, are immune from civil
6 liability for good faith actions they take to enforce this chapter.

7 E. In performing its duties pursuant to subsection A of this section,
8 the board may receive and review staff reports on complaints, malpractice
9 cases and all investigations.

10 Sec. 3. Section 32-2521, Arizona Revised Statutes, is amended to read:
11 32-2521. Qualifications

12 A. An applicant for licensure shall:

13 1. Have ~~attended and completed a course of training for~~ GRADUATED FROM
14 A physician assistants EDUCATIONAL PROGRAM approved by the board.

15 2. Pass a certifying examination approved by the board.

16 3. Be physically and mentally able to safely perform health care tasks
17 as a physician assistant.

18 4. Have a professional record that indicates that the applicant has
19 not committed any act or engaged in any conduct that constitutes grounds for
20 disciplinary action against a licensee pursuant to this chapter. This
21 paragraph does not prevent the board from considering the application of an
22 applicant who was the subject of disciplinary action in another jurisdiction
23 if the applicant's act or conduct was subsequently corrected, monitored and
24 resolved to the satisfaction of that jurisdiction's regulatory board.

25 5. Not have had a license to practice revoked by a regulatory board in
26 another jurisdiction in the United States for an act that occurred in that
27 jurisdiction that constitutes unprofessional conduct pursuant to this
28 chapter.

29 6. Not be currently under investigation, suspension or restriction by
30 a regulatory board in another jurisdiction in the United States for an act
31 that occurred in that jurisdiction that constitutes unprofessional conduct
32 pursuant to this chapter. If the applicant is under investigation by a
33 regulatory board in another jurisdiction, the board shall suspend the
34 application process and may not issue or deny a license to the applicant
35 until the investigation is resolved.

36 7. Not have surrendered, relinquished or given up a license in lieu of
37 disciplinary action by a regulatory board in another jurisdiction in the
38 United States for an act that occurred in that jurisdiction that constitutes
39 unprofessional conduct pursuant to this chapter. This paragraph does not
40 prevent the board from considering the application of an applicant who
41 surrendered, relinquished or gave up a license in lieu of disciplinary action
42 by a regulatory board in another jurisdiction if that regulatory board
43 subsequently reinstated the applicant's license.

1 B. The board may:

2 1. Require an applicant to submit written or oral proof of
3 credentials.

4 2. Make ~~such~~ investigations as it deems necessary to advise itself
5 with respect to the qualifications of the applicant, including physical
6 examinations, mental evaluations, written competency examinations or any
7 combination of ~~such~~ THESE examinations and evaluations.

8 ~~3. Grant an exemption from the licensure requirements of this section~~
9 ~~to:~~

10 ~~(a) A student enrolled in a physician assistant education program~~
11 ~~approved by the board in order for that student to work within that program.~~
12 ~~The student shall register with the board on a form prescribed by the board.~~

13 ~~(b) A physician assistant who is an employee of the United States~~
14 ~~government and who works on land or in facilities owned or operated by the~~
15 ~~United States government or a physician assistant who is a member of the~~
16 ~~reserve components of the United States and on official orders or performing~~
17 ~~official duties as outlined in the appropriate regulation of that branch.~~

18 C. If the board finds that the applicant committed an act or engaged
19 in conduct that would constitute grounds for disciplinary action in this
20 state, before issuing a license the board must determine to its satisfaction
21 that the act or conduct has been corrected, monitored and resolved. If the
22 act or conduct has not been resolved, before issuing a license the board must
23 determine to its satisfaction that mitigating circumstances exist that
24 prevent its resolution.

25 D. If another jurisdiction has taken disciplinary action against an
26 applicant, before issuing a license the board must determine to its
27 satisfaction that the cause for the action was corrected and the matter was
28 resolved. If the other jurisdiction has not resolved the matter, before
29 issuing a license the board must determine to its satisfaction that
30 mitigating circumstances exist that prevent its resolution.

31 E. The board may delegate to the executive director the authority to
32 deny licenses to applicants who do not meet the requirements of this section.

33 Sec. 4. Repeal

34 Section 32-2524, Arizona Revised Statutes, is repealed.

35 Sec. 5. Title 32, chapter 25, article 2, Arizona Revised Statutes, is
36 amended by adding a new section 32-2524, to read:

37 32-2524. Exemption from licensure

38 THIS CHAPTER DOES NOT REQUIRE LICENSURE OF:

39 1. A STUDENT WHO IS ENROLLED IN A PHYSICIAN ASSISTANT EDUCATION
40 PROGRAM APPROVED BY THE BOARD.

41 2. A PHYSICIAN ASSISTANT WHO IS AN EMPLOYEE OF THE UNITED STATES
42 GOVERNMENT AND WHO WORKS ON LAND OR IN FACILITIES OWNED OR OPERATED BY THE
43 UNITED STATES GOVERNMENT.

1 3. A PHYSICIAN ASSISTANT WHO IS A MEMBER OF THE RESERVE COMPONENTS OF
2 THE UNITED STATES AND WHO IS ON OFFICIAL ORDERS OR PERFORMING OFFICIAL DUTIES
3 AS OUTLINED IN THE APPROPRIATE REGULATION OF THAT BRANCH OF MILITARY SERVICE.

4 Sec. 6. Section 32-2526, Arizona Revised Statutes, is amended to read:
5 32-2526. Fees

6 A. By a vote at its annual fall meeting, the board shall establish
7 nonrefundable fees and penalties that do not exceed the following:

8 1. Processing an application for an active license, four hundred
9 dollars.

10 2. Issuing an active license, four hundred dollars.

11 ~~3. Application for a temporary license, one hundred dollars.~~

12 ~~4. Conversion from a temporary license to a regular license, three~~
13 ~~hundred dollars.~~

14 ~~5. 3. Annual renewal of a regular license, a fee of not to exceed~~
15 ~~four hundred dollars.~~

16 ~~6. 4. Penalty fee for late renewal of a regular license, three~~
17 ~~hundred fifty dollars.~~

18 ~~7. 5. Issuance of a duplicate license, twenty-five dollars.~~

19 ~~8. Approval of notification of supervision by a supervising physician,~~
20 ~~three hundred fifty dollars.~~

21 ~~9. Application to transfer the responsibility of the supervising~~
22 ~~physician to an approved supervising physician's agent, two hundred dollars.~~

23 ~~10. Adding a supervising physician agent subsequent to the approved~~
24 ~~notification of supervision, twenty-five dollars.~~

25 ~~11. 6. Verification of a license, ten dollars.~~

26 ~~12. 7. Copying records, documents, letters, minutes, applications and~~
27 ~~files, one dollar for the first three pages and twenty-five cents for each~~
28 ~~additional page.~~

29 ~~13. 8. For The sale of computerized tapes or diskettes that do not~~
30 ~~require programming, one hundred dollars.~~

31 ~~14. 9. For Services not required to be provided by this chapter, but~~
32 ~~which THAT the board deems appropriate to carry out the intent and purpose of~~
33 ~~this chapter, a fee of not to exceed the actual cost of providing the~~
34 ~~services. Notwithstanding section 32-2506, the board shall deposit, pursuant~~
35 ~~to sections 35-146 and 35-147, all of the monies collected under this~~
36 ~~paragraph in the Arizona medical board fund established by section 32-1406.~~

37 B. Notwithstanding subsection A of this section, on written request
38 the board may return the license renewal fee for good cause shown.

39 C. The board may collect from a drawer of a dishonored check, draft,
40 order or note an amount allowed pursuant to section 44-6852.

41 Sec. 7. Section 32-2528, Arizona Revised Statutes, is amended to read:
42 32-2528. Inactive license; application; prohibited activities

43 A. A person who holds a regular license pursuant to this chapter may
44 request an inactive license from the board if both of the following are true:

45 1. The licensee is not under investigation by the board.

1 2. The board has not begun disciplinary proceedings against the
2 licensee.

3 B. The board may grant an inactive license and shall waive the annual
4 renewal fee and requirements for continuing medical education if the person
5 certifies total retirement from the performance of health care tasks in this
6 state, any jurisdiction of the United States and any foreign country and is
7 current on all fees required by this chapter.

8 C. An inactive licensee shall not perform health care tasks ~~or~~
9 ~~continue to hold or maintain a drug enforcement administration controlled~~
10 ~~substance registration license. A licensee who performs health care tasks~~
11 ~~while holding an inactive license violates this chapter by performing health~~
12 ~~care tasks without a license.~~

13 D. The board may convert an inactive license to a regular license on
14 payment of the annual renewal fee and presentation of evidence to the board
15 that the holder possesses the medical knowledge and the physical and mental
16 ability to safely engage in the performance of health care tasks. The board
17 may require any combination of physical examination, psychiatric or
18 psychological evaluation, oral competency examination or a board qualified
19 written examination or interview it believes necessary to assist it in
20 determining the ability of a physician assistant who holds an inactive
21 license to return to regular licensure.

22 Sec. 8. Section 32-2531, Arizona Revised Statutes, is amended to read:

23 32-2531. Physician assistant scope of practice; health care
24 tasks; supervising physician duties; civil penalty

25 A. ~~After A supervising physician receives board approval of a notice~~
26 ~~of supervision, that physician may delegate health care tasks to the A~~
27 ~~physician assistant.~~

28 B. A PHYSICIAN ASSISTANT SHALL NOT PERFORM SURGICAL ABORTIONS AS
29 DEFINED IN SECTION 36-2151.

30 C. THE PHYSICIAN ASSISTANT MAY PERFORM THOSE DUTIES AND
31 RESPONSIBILITIES, INCLUDING THE ORDERING, PRESCRIBING, DISPENSING AND
32 ADMINISTRATION OF DRUGS AND MEDICAL DEVICES THAT ARE DELEGATED BY THE
33 SUPERVISING PHYSICIAN.

34 D. THE PHYSICIAN ASSISTANT MAY PROVIDE ANY MEDICAL SERVICE THAT IS
35 DELEGATED BY THE SUPERVISING PHYSICIAN IF THE SERVICE IS WITHIN THE PHYSICIAN
36 ASSISTANT'S SKILLS, IS WITHIN THE PHYSICIAN'S SCOPE OF PRACTICE AND IS
37 SUPERVISED BY THE PHYSICIAN.

38 E. THE PHYSICIAN ASSISTANT MAY PRONOUNCE DEATH AND, IF DELEGATED, MAY
39 AUTHENTICATE BY THE PHYSICIAN ASSISTANT'S SIGNATURE ANY FORM THAT MAY BE
40 AUTHENTICATED BY A PHYSICIAN'S SIGNATURE.

41 F. THE PHYSICIAN ASSISTANT IS THE AGENT OF THE PHYSICIAN ASSISTANT'S
42 SUPERVISING PHYSICIAN IN THE PERFORMANCE OF ALL PRACTICE RELATED ACTIVITIES,
43 INCLUDING THE ORDERING OF DIAGNOSTIC, THERAPEUTIC AND OTHER MEDICAL SERVICES.

44 G. The physician assistant may perform ~~these~~ HEALTH CARE tasks in any
45 setting authorized by the ~~approved~~ supervising physician ~~and the board,~~

~~pursuant to subsections E and F of this section~~, including PHYSICIAN OFFICES, clinics, hospitals, ambulatory surgical centers, patient homes, nursing homes and other health care institutions. These tasks may include:

1. Obtaining patient histories.
2. Performing physical examinations.
3. Ordering and performing diagnostic and therapeutic procedures.
4. Formulating a diagnostic impression.
5. Developing and implementing a treatment plan.
6. Monitoring the effectiveness of therapeutic interventions.
7. Assisting in surgery.
8. Offering counseling and education to meet patient needs.
9. Making appropriate referrals.
10. Prescribing schedule IV or V controlled substances as defined in the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242; 21 United States Code section 802) and prescription-only medications.
11. Prescribing schedule II and III controlled substances as defined in the federal controlled substances act of 1970.
12. Performing minor surgery as defined in section 32-2501.
13. Performing other nonsurgical health care tasks that are normally taught in courses of training approved by the board, that are consistent with the training and experience of the physician assistant and that have been properly delegated by the ~~approved~~ supervising physician.

~~B. H.~~ The ~~approved~~ supervising physician shall:

1. Meet the requirements established by the board for supervising a physician assistant and ~~receive written board notification of this compliance.~~
2. Accept responsibility for all tasks and duties the physician delegates to a physician assistant.
3. Notify the board and the physician assistant in writing if the physician assistant exceeds the scope of the delegated health care tasks.
- ~~4. Notify the board if the physician has delegated authority to the physician assistant to prescribe medication. The physician shall also notify the board if the physician makes any changes to this authority.~~

4. MAINTAIN A WRITTEN AGREEMENT WITH THE PHYSICIAN ASSISTANT. THE AGREEMENT MUST STATE THAT THE PHYSICIAN WILL EXERCISE SUPERVISION OVER THE PHYSICIAN ASSISTANT AND RETAINS PROFESSIONAL AND LEGAL RESPONSIBILITY FOR THE CARE RENDERED BY THE PHYSICIAN ASSISTANT. THE AGREEMENT MUST BE SIGNED BY THE SUPERVISING PHYSICIAN AND THE PHYSICIAN ASSISTANT AND UPDATED ANNUALLY. THE AGREEMENT MUST BE KEPT ON FILE AT THE PRACTICE SITE AND MADE AVAILABLE TO THE BOARD ON REQUEST.

I. A PHYSICIAN'S ABILITY TO SUPERVISE A PHYSICIAN ASSISTANT IS NOT AFFECTED BY RESTRICTIONS IMPOSED BY THE BOARD ON A PHYSICIAN ASSISTANT PURSUANT TO DISCIPLINARY ACTION TAKEN BY THE BOARD.

~~G. J.~~ Supervision MUST BE CONTINUOUS BUT does not require the personal presence of the physician at the place where health care tasks are

1 performed IF THE PHYSICIAN ASSISTANT IS IN CONTACT WITH THE SUPERVISING
2 PHYSICIAN BY TELECOMMUNICATION. IF THE PHYSICIAN ASSISTANT PRACTICES IN A
3 LOCATION WHERE A SUPERVISING PHYSICIAN IS NOT ROUTINELY PRESENT, THE
4 PHYSICIAN ASSISTANT MUST MEET IN PERSON OR BY TELECOMMUNICATION WITH A
5 SUPERVISING PHYSICIAN AT LEAST ONCE EACH WEEK TO ENSURE ONGOING DIRECTION AND
6 OVERSIGHT OF THE PHYSICIAN ASSISTANT'S WORK. The board by order may require
7 the personal presence of a SUPERVISING physician when designated health care
8 tasks are performed.

9 ~~D. A physician assistant shall meet in person with the supervising~~
10 ~~physician at least once each week to discuss patient management. If the~~
11 ~~supervising physician is unavailable due to vacation, illness or continuing~~
12 ~~education programs, a physician assistant may meet with the supervising~~
13 ~~physician's agent. If the supervising physician is unavailable for any other~~
14 ~~reason, the fulfillment of this responsibility by the supervising physician's~~
15 ~~agent is subject to board approval.~~

16 ~~E. A physician assistant shall not perform health care tasks in a~~
17 ~~place which is geographically separated from the supervising physician's~~
18 ~~primary place for meeting patients without the authorization of the~~
19 ~~supervising physician and the board.~~

20 ~~F. The board may approve the performance of health care tasks by a~~
21 ~~physician assistant in a place which is geographically separated from the~~
22 ~~supervising physician's primary place for meeting patients if:~~

23 ~~1. Adequate provision for immediate communication between the~~
24 ~~supervising physician or supervising physician's agent and the physician~~
25 ~~assistant exists.~~

26 ~~2. The physician assistant's performance of health care tasks is~~
27 ~~adequately supervised and reviewed.~~

28 ~~3. A printed announcement which contains the names of the physician~~
29 ~~assistant and supervising physician and states that the facility employs a~~
30 ~~physician assistant who is performing health care tasks under the supervision~~
31 ~~of a licensed physician is posted in the waiting room of the geographically~~
32 ~~separated site.~~

33 ~~G. K. At all times while a physician assistant is on duty, he THE~~
34 ~~PHYSICIAN ASSISTANT shall wear a name tag with the designation "physician~~
35 ~~assistant" on it.~~

36 ~~H. L. The board by rule may prescribe a civil penalty for a violation~~
37 ~~of this article relating to charting, wearing tags, identifying prescriptions~~
38 ~~and posting signs in geographically separated locations. The penalty shall~~
39 ~~not exceed fifty dollars for each violation. The board shall deposit,~~
40 ~~pursuant to sections 35-146 and 35-147, all monies it receives from this~~
41 ~~penalty in the state general fund. A physician assistant and the supervising~~
42 ~~physician may contest the imposition of this penalty pursuant to board~~
43 ~~rule. The imposition of a civil penalty is public information, and the board~~
44 ~~may use this information in any future disciplinary actions.~~

1 Sec. 9. Section 32-2533, Arizona Revised Statutes, is amended to read:
2 32-2533. Supervising physician; responsibilities

3 A. ~~The~~ A supervising physician is responsible for all aspects of the
4 performance of a physician assistant, whether or not the supervising
5 physician actually pays the physician assistant a salary. The supervising
6 physician is responsible for supervising the physician assistant and ensuring
7 that the health care tasks performed by a physician assistant are within the
8 physician assistant's scope of training and experience and have been properly
9 delegated by the supervising physician.

10 B. EACH PHYSICIAN-PHYSICIAN ASSISTANT TEAM MUST ENSURE THAT:

11 1. THE PHYSICIAN ASSISTANT'S SCOPE OF PRACTICE IS IDENTIFIED.

12 2. THE DELEGATION OF MEDICAL TASKS IS APPROPRIATE TO THE PHYSICIAN
13 ASSISTANT'S LEVEL OF COMPETENCE.

14 3. THE RELATIONSHIP OF, AND ACCESS TO, THE SUPERVISING PHYSICIAN IS
15 DEFINED.

16 4. A PROCESS FOR EVALUATION OF THE PHYSICIAN ASSISTANT'S PERFORMANCE
17 IS ESTABLISHED.

18 B. C. A supervising physician shall not supervise more than ~~two~~ FOUR
19 physician assistants who work ~~the same hours at the same employment location.~~
20 AT THE SAME TIME.

21 ~~C. A supervising physician may designate a supervising physician's~~
22 ~~agent to provide consultation and supervise a physician assistant when the~~
23 ~~supervising physician is not immediately available. The supervising~~
24 ~~physician remains responsible for the acts of a physician assistant when the~~
25 ~~physician assistant is supervised by a supervising physician's agent.~~

26 D. A supervising physician shall develop a system for recordation and
27 review of all instances in which the physician assistant prescribes fourteen
28 day prescriptions of schedule II or schedule III controlled substances. ~~The~~
29 ~~board shall approve this system.~~

30 ~~E. In order to act as a supervising physician or a supervising~~
31 ~~physician's agent, a physician shall:~~

32 ~~1. Complete an application as prescribed by the board.~~

33 ~~2. Hold a license pursuant to chapter 13 or 17 of this title and not~~
34 ~~hold a license under probation, restriction or suspension unrelated to~~
35 ~~rehabilitation.~~

36 ~~3. Submit a statement that the supervising physician or supervising~~
37 ~~physician's agent is familiar with the statutes and rules regarding the~~
38 ~~performance of health care tasks of physician assistants and accepts~~
39 ~~responsibility for supervising the physician assistant.~~

40 ~~F. A physician who violates the provisions of this chapter shall not~~
41 ~~serve as a supervising physician or supervising physician's agent.~~

42 ~~G. The supervising physician's agent is responsible for the acts of a~~
43 ~~physician assistant in the absence of the supervising physician if the board~~
44 ~~approves. The board considers the supervising physician's agent's signature~~
45 ~~on a physician assistant's current notification of supervision to be~~

1 ~~acknowledgement by the supervising physician's agent that the agent~~
2 ~~understands and is familiar with the physician assistant's approved health~~
3 ~~care tasks.~~

4 ~~H. A supervising physician or supervising physician's agent shall not~~
5 ~~delegate to the physician assistant any health care task that the supervising~~
6 ~~physician or supervising physician's agent does not have training or~~
7 ~~experience in and does not perform.~~

8 Sec. 10. Repeal

9 Section 32-2534, Arizona Revised Statutes, is repealed.

10 Sec. 11. Title 32, chapter 25, article 3, Arizona Revised Statutes, is
11 amended by adding a new section 32-2534, to read:

12 32-2534. Initiation of practice

13 A PHYSICIAN ASSISTANT MAY NOT PERFORM HEALTH CARE TASKS UNTIL THE
14 PHYSICIAN ASSISTANT HAS COMPLETED AND SIGNED A WRITTEN AGREEMENT WITH A
15 SUPERVISING PHYSICIAN PURSUANT TO SECTION 32-2531, SUBSECTION H, PARAGRAPH 4.

16 Sec. 12. Section 32-2551, Arizona Revised Statutes, is amended to
17 read:

18 32-2551. Grounds for disciplinary action; duty to report;
19 immunity; proceedings; board action; notice; civil
20 penalty

21 A. The board on its own motion may investigate any evidence that
22 appears to show that a physician assistant is or may be medically
23 incompetent, is or may be guilty of unprofessional conduct or is or may be
24 mentally or physically unable to carry out approved health care tasks. Any
25 physician, physician assistant or health care institution as defined in
26 section 36-401 shall, and any other person may, report to the board any
27 information the physician, physician assistant, health care institution or
28 other person has that appears to show that a physician assistant is or may be
29 medically incompetent, is or may be guilty of unprofessional conduct or is or
30 may be mentally or physically unable to carry out approved health care tasks.
31 IF THE BOARD BEGINS AN INVESTIGATION PURSUANT TO THIS SECTION, IT MAY REQUIRE
32 THE PHYSICIAN ASSISTANT TO PROMPTLY PROVIDE THE NAME AND ADDRESS OF THE
33 PHYSICIAN ASSISTANT'S SUPERVISING PHYSICIAN OR PHYSICIANS. The board or the
34 executive director shall notify the physician assistant and the ~~approved~~
35 supervising physician of the content of the reported information in writing
36 within one hundred twenty days of its receipt of the information. Any
37 physician, physician assistant, health care institution or other person that
38 reports or provides information to the board in good faith is not subject to
39 an action for civil damages as a result of reporting or providing
40 information, and, if requested, the name of the reporter shall not be
41 disclosed unless the information is essential to proceedings conducted
42 pursuant to this section.

43 B. The board or, if delegated by the board, the executive director may
44 require a mental, physical or medical competency examination or any
45 combination of those examinations or may make investigations including

1 investigational interviews between representatives of the board and the
2 physician assistant and the supervising physician as it deems necessary to
3 fully inform itself with respect to any information reported pursuant to
4 subsection A of this section. These examinations may include biological
5 fluid testing and other examinations known to detect the presence of alcohol
6 or other drugs. The board or, if delegated by the board, the executive
7 director may require the physician assistant, at the physician assistant's
8 expense, to undergo assessment by a board approved rehabilitative, retraining
9 or assessment program.

10 C. If the board finds, based on the information it receives under
11 subsections A and B of this section, that the public safety imperatively
12 requires emergency action, and incorporates a finding to that effect in its
13 order, the board may restrict a license or order a summary suspension of a
14 license pending proceedings for revocation or other action. If the board
15 acts pursuant to this subsection, the physician assistant shall also be
16 served with a written notice of complaint and formal hearing, setting forth
17 the charges, and is entitled to a formal hearing before the board or an
18 administrative law judge on the charges within sixty days pursuant to title
19 41, chapter 6, article 10.

20 D. If, after completing its investigation, the board finds that the
21 information provided pursuant to subsection A of this section is not of
22 sufficient seriousness to merit disciplinary action against the physician
23 assistant's license, it may take the following actions:

24 1. Dismiss if, in the opinion of the board, the complaint is without
25 merit.

26 2. File an advisory letter. The licensee may file a written response
27 with the board within thirty days after receiving the advisory letter.

28 3. Require the licensee to complete designated continuing medical
29 education courses.

30 E. If the board finds that it can take rehabilitative or disciplinary
31 action without the presence of the physician assistant at a formal interview
32 it may enter into a consent agreement with the physician assistant to limit
33 or restrict the physician assistant's practice or to rehabilitate the
34 physician assistant, protect the public and ensure the physician assistant's
35 ability to safely practice. The board may also require the physician
36 assistant to successfully complete a board approved rehabilitative,
37 retraining or assessment program at the physician assistant's own expense.

38 F. The board shall not disclose the name of the person who provided
39 the information regarding a licensee's drug or alcohol impairment or the name
40 of the person who files a complaint if that person requests anonymity.

41 G. If, after completing its investigation, the board believes that the
42 information is or may be true and that the information may be of sufficient
43 seriousness to merit direct action against the physician assistant's license,
44 it may request a formal interview with the physician assistant and the
45 supervising physician. If the physician assistant refuses the invitation for

1 a formal interview, the board may issue a formal complaint and order that a
2 hearing be held pursuant to title 41, chapter 6, article 10. The board shall
3 notify the physician assistant in writing of the time, date and place of the
4 formal interview at least twenty days before the interview. The notice shall
5 include the right to be represented by counsel and shall fully set forth the
6 conduct or matters to be discussed.

7 H. After the formal interview, the board may take the following
8 actions:

9 1. Dismiss if, in the opinion of the board, the information is without
10 merit.

11 2. File an advisory letter. The licensee may file a written response
12 with the board within thirty days after receiving the advisory letter.

13 3. Enter into a stipulation with the physician assistant to restrict
14 or limit the physician assistant's practice or medical activities or to
15 rehabilitate, retrain or assess the physician assistant, in order to protect
16 the public and ensure the physician assistant's ability to safely perform
17 health care tasks. The board may also require the physician assistant to
18 successfully complete a board approved rehabilitative, retraining or
19 assessment program at the physician assistant's own expense as prescribed in
20 subsection E of this section.

21 4. File a letter of reprimand.

22 5. Issue a decree of censure. A decree of censure is a disciplinary
23 action against the physician assistant's license and may include a
24 requirement for restitution of fees to a patient resulting from violations of
25 this chapter or rules adopted under this chapter.

26 6. Fix a period and terms of probation best adapted to protect the
27 public health and safety and rehabilitate or educate the physician
28 assistant. Failure to comply with any terms of probation is cause for
29 initiating formal proceedings pursuant to title 41, chapter 6, article
30 10. Probation may include:

31 (a) Restrictions on the health care tasks the physician assistant may
32 perform.

33 (b) Temporary suspension for not to exceed twelve months.

34 (c) Restitution of patient fees.

35 (d) Education or rehabilitation at the licensee's own expense.

36 7. Require the licensee to complete designated continuing medical
37 education courses.

38 I. If the board finds that the information provided pursuant to
39 subsection A of this section warrants suspension or revocation of a physician
40 assistant's license, it shall immediately initiate formal proceedings for the
41 suspension or revocation of the license as provided in title 41, chapter 6,
42 article 10. The notice of complaint and hearing is fully effective by
43 mailing a true copy of the notice of complaint and hearing by certified mail
44 addressed to the physician assistant's last known address of record in the

1 board's files. The notice of complaint and hearing is complete at the time
2 of its deposit in the mail.

3 J. A physician assistant who after a formal hearing pursuant to title
4 41, chapter 6, article 10 is found to be medically incompetent, guilty of
5 unprofessional conduct or mentally or physically unable to safely carry out
6 the physician assistant's approved health care tasks, or any combination of
7 these, is subject to censure, probation, suspension or revocation, or any
8 combination of these, for a period of time or permanently and under
9 conditions the board deems appropriate for the protection of the public
10 health and safety.

11 K. In a formal interview pursuant to subsection G of this section or
12 in a hearing pursuant to subsection I of this section, the board in addition
13 to any other action may impose a civil penalty in the amount of not less than
14 three hundred dollars nor more than ten thousand dollars for each violation
15 of this chapter or a rule adopted under this chapter.

16 L. An advisory letter is a public document and may be used in future
17 disciplinary actions against a physician assistant.

18 M. The board may charge the costs of a formal hearing to the licensee
19 if it finds the licensee in violation of this chapter.

20 N. If the board acts to modify a physician assistant's prescription
21 writing privileges, the Arizona regulatory board of physician assistants
22 shall immediately notify the Arizona state board of pharmacy and the United
23 States drug enforcement administration of this modification.

24 O. If during the course of an investigation the Arizona regulatory
25 board of physician assistants determines that a criminal violation may have
26 occurred involving the performance of health care tasks, it shall provide
27 evidence of the violation to the appropriate criminal justice agency.

28 P. The board may accept the surrender of an active license from a
29 person who admits in writing to any of the following:

- 30 1. Being unable to safely engage in the practice of medicine.
- 31 2. Having committed an act of unprofessional conduct.
- 32 3. Having violated this chapter or a board rule.

33 Q. In determining the appropriate disciplinary action under this
34 section, the board shall consider all previous nondisciplinary and
35 disciplinary actions against a licensee.

36 Sec. 13. Effective date

37 This act is effective from and after December 31, 2010:

APPROVED BY THE GOVERNOR APRIL 27, 2010.

FILED IN THE OFFICE OF THE SECRETARY OF STATE APRIL 28, 2010.